


**ASSIGNMENT**

This Assignment Agreement ("Agreement") is entered into on this 29th day of Oct, 2021 by and between **Ronald A Johnson**, 571 Coal Street, Apt. 1, Pittsburgh, PA 15221 ("Assignor") and **Adams & Cohen, LLC**, a Florida Limited Liability Company, 841 Prudential Drive, Suite 1200, Jacksonville, FL 32207 ("Assignee").

1. Assignor is/ was a debtor/ creditor in Bankruptcy Case # 17-23925 Debtor (s): Ronald A Johnson and was filed in the United States Bankruptcy Court Western District of Pennsylvania ("Bankruptcy Case"). In his/ capacity as debtor/ creditor, Assignor was entitled to a distribution of funds in the amount of \$11,875.00 ("Funds"), remittance was attempted by the Trustee at the Assignor's last known address. Such remittance was never negotiated, however and pursuant to Federal Rule of Bankruptcy Procedure 3011 and 11 U.S.C. 347, the Trustee remitted the funds to the Clerk of the Court for payment on to the Registry of Unclaimed Funds. Such Funds are subject to withdrawal as Provided by 28 U.S.C. 2042.
2. Rather than attempting to collect the Funds- and in an effort to both save the expense of such a collection, as well as to expedite the liquidating of their interest in the Funds- Assignor desires to legally assign his/ her interest in such Funds and Assignee desires to purchase and obtain such interest in the Funds. Therefore, with both parties being of sound mind, and operating in the manner in which they deem to be in their mutual best interest, Assignor shall convey all rights, title and interest that Assignor has in the Funds and the Claim which generated same, and Assignee shall purchase all rights, title and interest that Assignor has in the funds and such Claim as generated same.
3. For Good and valuable consideration, the Assignor does hereby irrevocably transfer and assign to Assignee and assigns, all of his/ her rights, title and interest to Assignee in reference to this Claim/ Funds.
4. **Consideration:** The consideration herein given by Assignee to Assignor shall be the sum of \$            which sum shall be remitted to Assignor. A check will be issue to the Assignor for the above stated amount once this claim is approved.
5. This assignment shall be deemed an absolute and unconditional assignment of Claim for the purpose of collection and satisfaction shall not be deemed to create a security interest.
6. Assignor represents and warrants to Assignee that no payment or other distribution has been received by or on behalf of Assignor in full or partial satisfaction of the assigned rights; that Assignor has not previously sold or assigned the rights, in whole or in part, to any party.
7. Assignor hereby irrevocably appoints Assignee, Adams & Cohen, LLC, as its true and lawful attorney-in-fact to act in Assignor's stead with respect to the Claim/ Funds assigned.
8. This Agreement constitutes the entire agreement and understanding between the parties with respect to the subject matter above.

IN WITNESS WHEREOF, the undersigned have duly executed this Agreement by their duly authorized representatives as of the above Date of this Agreement.

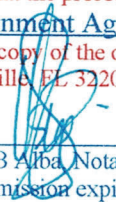
ASSIGNOR: Ronald A Johnson

  
Signature: Ronald A Johnson

ASSIGNEE: Jairo Camargo for Adams & Cohen, LLC

  
Signature: Jairo Camargo

On this 29th day of Nov, 2021, I, Jairo Camargo  
Certify that the preceding or attached document titled  
Assignment Agreement ( 1 ) Page(s), is a true, accurate, complete  
redacted copy of the original being kept at 841 Prudential Drive, Suite 1200,  
Jacksonville, FL 32207.

  
Oslens B Alba, Notary Public State of Florida  
My Commission expires: May 13, 2023



**Oslens B Alba**  
Comm. # GG324795  
Expires: May 13, 2023  
Bonded Thru Aaron Notary

# ADAMS & COHEN

841 Prudential Drive, Suite 1200  
Jacksonville, FL 32207-1105  
E-mail: [admin@adamscohen.com](mailto:admin@adamscohen.com)

Tel 904-204-9148  
Fax 888-978-2226

## NOTICE OF ASSIGNMENT


For good and valuable consideration, receipt of which is hereby acknowledged, the undersigned, **Ronald A Johnson** "Assignor") hereby assigns, conveys, and transfers over and unto Adams & Cohen, LLC ("Assignee"), any and all of right, title, and interest in and to the below reference claim/ funds:

The Assigned claim/ funds:

Court: U.S. Bankruptcy Court Western District of Pennsylvania  
Debtor(s): Ronald A Johnson  
Case Number: 17-23925  
Claim #: Scheduled

CLAIM IS ASSIGN "AS IS", WHERE IS" WITH NO WARRANTIES OR REPRESENTATIONS WHATSOEVER, EXCEPT AS EXPRESSLY PROVIDED IN THE ASSIGNMENT AGREEMENT, INCLUDING, WITHOUT LIMITATION, WARRANTIES OF MERCHANT ABILITY OR FITNESS FOR A PARTICULAR PURPOSE.

IN WITNESS WHEREOF, the parties hereto have caused this notice of assignment to be executed as of: 10/29/2021

  
Signature: Ronald A Johnson

On this 2<sup>nd</sup> day of NOV, 2021, I, Jairo Camargo  
Certify that the preceding or attached document titled  
Notice of Assignment ( 1 ) Page(s), is a true, accurate, complete  
Redacted copy of the original being kept at 841 Prudential Drive, Suite 1200,  
Jacksonville, FL 32207.

Osleny's Alba- Notary Public State of Florida  
My Commission expires: May 13, 2023



Osleny's B Alba  
Comm. #GG324795  
Expires: May 13, 2023  
Bonded Thru Aaron Notary



A+ Rating

State of Florida License: A9900096

[adamscohen.com](http://adamscohen.com)



Transaction Date: 09/02/2019 18:21:04 ET

**Sender:**

Name: Ronald Johnson  
Address: 316 BROADWAY  
City: ELIZABETH  
State: NJ  
ZIP Code: 07206  
Country: UNITED STATES  
Phone Number: 3474525930

**Receiver:**

Name: Jennifer Lance  
State: NY  
Country: UNITED STATES  
Mobile Number: 9294280583  
Expected Payout Location: NY,UNITED STATES

**Proof of Previous  
Address**

**Payment Information:**

Card Type: Visa®  
Card Number: XXXX-XXXX-XXXX-2079  
Expiration Date: XX/XXXX  
Auth Code: 008734  
Transaction Type: Purchase

**Payout Information:**

Today's Date: September 02, 2019  
Delivery Method: At any agent location in receiver's expected payout location.

**Billing Summary:**

Transfer Amount: 40.00 USD  
Transfer Fees: + 5.99 USD  
Promotion Discount: - 0.00 USD  

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Total: 45.99 USD

**Transfer Summary:**

Transfer Amount: 40.00 USD  

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Total to Receiver: 40.00 USD

Western Union also makes money from currency exchange.

If your payment method is a credit or debit card, please note card issuer cash advance fee and associated interest charges may apply.

Gold Card/ My WU® #: 373934636

Points Earned: 6

Total Points: 24

We value your opinion! Go to [westernunion.com/listens](https://westernunion.com/listens) to tell us about our service. Survey code: 7585688110.

**WESTERN UNION MONEY TRANSFER® SERVICES ("SERVICES") ARE PROVIDED TO YOU SUBJECT TO THE TERMS AND CONDITIONS (CLICK HERE FOR THE FULL [TERMS AND CONDITIONS](#)) AND APPLICABLE LAW.** Service depends on factors including Service selected, selected delivery options, amount sent, destination country, currency availability, regulatory and consumer protection issues, identification requirements, delivery restrictions, agent location hours, differences in time zones, and additional terms set forth in the full [terms and conditions](#) (collectively, "Restrictions"). The designated recipient ("Receiver") may generally receive funds sent by Western Union consumer ("You") at Agent locations in the Expected Payout Location. For transactions received within the U.S., Expected Payout Location generally means any Agent location in the destination state or U.S. territory. For transactions received outside the U.S., Expected Payout Location generally means any Agent location in the destination country. Services offered by Telecomunicaciones de Mexico ("Telecomm") are only available at Telecomm locations. You may pay for the Services using a U.S. issued Visa or MasterCard credit card, or debit card issued by a financial institution located in the U.S. ("Bank Card"). Alternatively, you may pay with cash at a Western Union Agent location or using Western Union's WUPay, ACH or Account based options ("Alternative Payment Options"). The total due is payable before Western Union processes the transaction. If Western Union does not receive authorization from the bank or other provider of an Account (the "Account Provider"), the transaction will not be processed and funds will not be transmitted to the Receiver. Western Union shall charge Your designated Bank Card or applicable Account for the Total disclosed to You relating to the transaction. Account Provider may impose additional fees on an Account. The agreement with the Account Provider governs use of an Account and provides the rights and liabilities of the holder of an Account. Receiver will normally receive funds sent by You in cash, check, or a combination thereof; with some Services, funds may be credited to a bank, prepaid or credit card.

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In the Matter of:

JOHNSON, RONALD A

Debtor,

Rosemary C. Crawford, Trustee

Movant,

No Respondent.

Case No. 17-23925-TPA

Chapter 7

Doc. No.

TRANSMITTAL OF UNCLAIMED FUNDS

Rosemary C. Crawford, Trustee of this estate, reports the following:

A check was issued to the following debtor on September 23, 2020; pursuant to Adversary #19-02144 Docket #18 Order Approving the Trustee's Proposed Distribution of Property of the Estate and the Consent Order of Court filed on September 2, 2020 at Docket #173.

1. The check made payable to the following debtor has not been cashed and ninety days have passed since the final distribution and a stop payment was placed on the check:

Ronald Johnson	\$11,875.00
316 Broadway	
Elizabeth, NJ 07206	
Total	\$11,875.00

2. Due to the debtor not cashing his check said monies are being turned over to the Court. My Trustee check for \$11,875.00 made payable to the Clerk, U.S. Bankruptcy Court is attached to this report.

Respectfully submitted,

/s/ Rosemary C. Crawford

Rosemary C. Crawford, Esq., Trustee  
Crawford McDonald, LLC.

P.O. Box 355

Allison Park, PA 15101

Pa. I.D. No. 56981

(724) 443-4757

crawfordmcdonald@aol.com

Dated March 17, 2021

Trustee \* Transmittal of Unclaimed Funds



## ADAMS & COHEN

841 Prudential Drive, Suite 1200  
Jacksonville, FL 32207  
E-mail: admin@adamscohen.com

Tel 904-204-9148  
Fax 888.978.2226

### CORPORATE RESOLUTION

I, **Jairo Camargo**, as Managing Member of ADAMS & COHEN, LLC, an LLC corporation organized and existing under the laws of the State of Florida (the "LLC") DO HEREBY certify that the following is true and correct copy of a resolution duly adopted by Jairo Camargo, Managing Member of the LLC on October 27, 2021, and that such resolution has not been modified, rescinded or revoked, and is at present in full force and effect:

**RESOLVED:** That Jairo Camargo, as Managing Member of Adams & Cohen, LLC is empowered and authorized to execute all types of legal documentation, filings and contracts on behalf of the LLC.

I hereby certify that I am the sole officer and only Managing Partner of Adams & Cohen, LLC.

**IN WITNESS WHEREOF**, the undersigned has affixed his signature and the corporate seal of the LLC this 27<sup>th</sup> day of October 2021.

  
\_\_\_\_\_  
Jairo Camargo  
Managing Partner of Adams & Cohen, LLC

SWORN and SUBSCRIBED before me this  
27<sup>th</sup> day of October 2021.

  
\_\_\_\_\_  
Notary Public

Corporate Seal



Oslenys B Alba  
Comm. #GG324795  
Expires: May 13, 2023  
Bonded Thru Aaron Notary

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000097952

**Entity Name:** ADAMS & COHEN, LLC

**Current Principal Place of Business:**

841 PRUDENTIAL DRIVE  
SUITE 1200  
JACKSONVILLE, FL 32207

**FILED**  
**Apr 21, 2021**  
**Secretary of State**  
**6245534218CC**

**Current Mailing Address:**

P.O. BOX 24048  
JACKSONVILLE, FL 32241 US

**FEI Number:** 26-3552751

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GORMAN, LENARD H ESQ.  
9100 S. DADELAND BLVD.  
10TH FLOOR  
MIAMI, FL 33156 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** LENARD H GORMAN

Electronic Signature of Registered Agent

04/21/2021

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CAMARGO, JAIRO  
Address P.O. BOX 24048  
City-State-Zip: JACKSONVILLE FL 32241

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAIRO CAMARGO

MANAGING PARTNER

04/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date